

CLAIMS ONLY						Application Number 10506931		Filing Date				
						Applicant(s)						
						* May be used for additional claims or amendments						
						*	*	*	*			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
1	Indep	Depend	Indep	Depend	Indep	Depend	51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12							62					
13							63					
14							64					
15	1		1				65					
16	1		1				66					
17	1		1				67					
18	1		1				68					
19	1		1				69					
20	1		1				70					
21	1		1				71					
22	1		1				72					
23	1		1				73					
24	1		1				74					
25	1		1				75					
26	1		1				76					
27	1		1				77					
28	1		1				78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	1	1	1				Total Indep					
Total Depend	13	13	13				Total Depend					
Total Claims	14	14	14				Total Claims					